II



### 7

Xerox Docket No. D/A3579

### **PATENT APPLICATION**

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Donald J. CURRY et al.

Application No.: 10/776,603

Filed: February 12, 2004

Docket No.:

117747

For:

SYSTEMS AND METHODS FOR ADJUSTING IMAGE DATA TO FORM

HIGHLY COMPRESSIBLE IMAGE PLANES

### **SUBMISSION OF ORIGINAL DECLARATION**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Submitted herewith is the original signed Declaration of the Inventors. This Declaration corresponds to the facsimile copy of the Declaration filed on February 12, 2004.

Respectfully submitted,

James A. Oliff

Registration No. 27,075

Jaquelin K. Spong Registration No. 52,241

JAO:JKS/eks

Date: May 26, 2004

OLIFF & BERRIDGE, PLC P.O. Box 19928 Alexandria, Virginia 22320 Telephone: (703) 836-6400

## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named in the or, I hereby declare that:

4

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEMS AND METHODS FOR ADJUSTING IMAGE DATA TO FORM HIGHLY COMPRESSIBLE IMAGE PLANES

described and claimed in the specification:  Check one  *a.								
		none						
The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):  none								
I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:								
Kevin R Nola Ma James A William Kirk M Thomas Edward	F. Chapuran Re A. Kepner Re ae McBain Re A. Oliff Re a P. Berridge Re b. Hudson Re a J. Pardini Re a P. Walker Re	g. No. 31,342; gg. No. 26,402; gg. No. 32,145; gg. No. 35,782; gg. No. 27,075; gg. No. 30,024; gg. No. 27,562; gg. No. 30,411; gg. No. 31,450; gg. No. 32,771;	Elizabeth F. Harasek Eugene O. Palazzo Mario A. Costantino Joel S. Armstrong Christopher W. Brown Richard E. Rice Paul Tsou Eric D. Morehouse	Reg. No. 28,850; Reg. No. 20,881; Reg. No. 33,565; Reg. No. 36,430; Reg. No. 38,025; Reg. No. 31,560; Reg. No. 37,956; and Reg. No. 38,565.				
ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.								
of my own knowledge are statements were made wi	e true and that all statem th the knowledge that w 01 of Title 18 of the Uni	ents made on informatiliful false statements	ation and belief are believed to and the like so made are puni	hat all statements made herein be true; and further that these ishable by fine or imprisonment, ats may jeopardize the validity				
1 Typewritten Ful of First or Sole		Donald		av.n.n.v				
of rust of sole	invenior —	Given Name	J. Middle Initial	CURRY Family Name				
2 **INVENTOR'	S SIGNATURE:	Donal		Carry				
3 **DATE OF SIGNATURE:		7	11	2004				
5 DATE OF SI		Month	Day	Year				
Residence:	San Mate		California	U.S.A.				
	City		State or Province	Country				
Citizenship:	United States Post Office Address: (Insert complete mailing address,	333 Leland Av	enue					
*This form may be exec	including country)		alifornia 94025, USA on (including claims) at the e	nd thereof if Box a. is checked.				

\*\*Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

# Page 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

1	Typewritten F	ull Name			
	of Second Join	nt Inventor (if any)	Asghar		NAFARIEH
			Given Name	Middle Initial	Family Name
2	**INVENTOR'S SIGNATURE:		aha h	$\mathcal{I}$	
3	**DATE OF SIGNATURE:		Feb	1-1	2004
3	**DATE OF SIGNATURE:		Month	Day	Year
	Davidson.	Menlo Park		ifomia	U.S.A.
	Residence:	City	State or Province		Country
	O	United States	State 0.	1 1 TOVINCE	Country
	Citizenship: United States Post Office Address:			<del></del>	
		(Insert complete	525 Morey Drive		
		mailing address,			
	including country)		Menlo, Park, Californ		
1	31				
	of Third Joint	Inventor (if any)	Doron Given Name	Middle Initial	KLETTER
			•		Family Name
2	**INVENTOR'S SIGNATURE:		Dovon	Kletter	
3 **DATE OF S		SIGNATURE:	Feb		2004
			Month	Day	Year
	Residence:	Menlo Park	California		U.S.A.
		City	State or Province		Country
	Citizenship:	United States			
		Post Office Address:		···	
		(Insert complete	20 Turtle Bay Place San Mateo, California 94402, USA		
		mailing address, including country)			
1	Typewritten F		- Jan Marco, Camorna	. 51102, 0011	<u> </u>
		nt Inventor (if any)			
			Given Name	Middle Initial	Family Name
2	**INVENTO	R'S SIGNATURE:			
3	**DATE OF	SIGNATURE:			
			Month	Day	Year
	Residence:			•	
	Residence.	City	State o	State or Province	
	Citizenship:	•	S.4.0 S. 2.10		Country
	Citizenship.	Post Office Address:			<del></del>
		(Insert complete			
		mailing address,	· · ·		
-	m m	including country)			
I	Typewritten Full Name of Fifth Joint Inventor (if any)				
	oj Fijin Joini I	nvenior (ij any)	Given Name	Middle Initial	Family Name
2	**!NIX/ENIT/AT	NC CIONATUDE	Green reams	Middle illinia	ranniy ranne
2		R'S SIGNATURE:			
3	**DATE OF S	GIGNATURE:			
	Danistana		Month	Day	Year
	Residence:	City	Stat	a or Province	Country
	<b>.</b>	City	State or Province		Country
	Citizenship:	Post Office Address:			
		(Insert complete			
		mailing address,			
		including country)			

<sup>\*\*</sup>Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.